

## SEP | 8 2001

For Ecology Use Fee Paid 10.00

Date Sept. 18,01

## State of Washington REG

Application for a Water Right
Please follow the attached instructions to avoid unnecessary delays.

Section	I. APPL	ICANI -	PERSON	, ORGA	NIZAT	ION, OR	WAI	ER SI	STEN	$a_{-}$
Name Mun:	icipal Du	ck Co.,	Inc.			Home Tel:(_	)_			
Mailing Add	dress 1921	5 S. Lata	ah Creek	Road		Work Tel:( <u>50</u>	)9_)_	<u> 245–37</u>	37	
City Valle	eyford	St	ate WA Zi	p+4 <u>99036</u>	+	FAX:(	)_			<del></del>
	2. CONT as above	ACTUAL CONTRACTOR OF CONTRACTOR	Committee of the contract of t			TTHE A				
Name Cha	arles A.	Dunn				Home Tel:	09)	<u> 245</u>	3737	<u> </u>
Mailing Add	lress PMB -	266 415 1	N. Sulliv	an		Work Tel:(	)_			
City_Verac	la1e	St	ate WA Zi	p+4 <u>99037</u>	+	FAX:(_	)_	<u> </u>		
Relationship	to applican	t_Preside	ent of Co	mpany						
Section	3. STAT	EMIENT	OF INTE	ENT			100			
of <u>Irrigation</u> cubic feet of <u>Irrigation</u> DESCRIPT sufficient.	t per second)  Ition / A  ION OF TI  See att	) fr <mark>om a 🛛 s rgicultur</mark> HE PLACE ached leg	urface water <u>ce / Farm</u> OF USE. (§ gal descr	source or C  / Domest See instruct iption.	ground ic je	water source ( . ATOTE: A tax pa	check FTAC	only one <b>H A "L</b> I	e) for the EGAL"	purpose(s)
□ Check	if the water	use is propo	sed for a she	ort-term proj	ect. Indic	cate the period	l of tin	ne that th	e water v	will be neede
	From		_ to							
Section		ER SOUF								5 1 3 30, 13
If SURFA	CE WATE	R			If GRO	UNDWATE	R			
lake, etc. l stream," et	funnamed, c.: Hangm	and indicate write "unnar an Creek	ned spring,"		A permi	t is desired for	r	V	vell(s).	
	diversions:				C: 0- d	lanth of 11(c	.).	1		
	e River	ne of body of	water):		Size & C	lepth of well(s	5):			
LOCATIO	DИ	e e gradinale e e Grafie e e e e e e e e e e e e e e e e e e								
Enter the section co		and east-w	est distance	es in feet fro	om the po	oint of divers	ion or	withdra	wal to t	he nearest
¼ of	*/4 of	Section	Township .	Range(E/W)		County	If loc		below:	tted, complete
SE	W5W	13	23N	43E	Spok	ane /				
2	Per letter	dated 9/1	7/01	700	Spok					
For Ecology U	se Date Re	eccived: Sep	1 13 , 2	OO   Prior	rity Date: 5	eot. 18,	2001			
SEPA: Exemp		FERC Licens		0. <del>*</del>		Of Health #				
Date Accepted	As Complete	13-17-	О (Ву	Date	Returned		Ву		WRIA:5	6
	1				A	ppl. No.:	50		38	
ECY 040-1-14 Rev. 7/97 * *		LICATION	N /	//						Harrison

Hangman Creek low flow Family Farm

	non 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: _unnamed.
В.	Briefly describe your proposed water system. (See instructions.)
	2½ horse centrifugal pump with 2" above-ground lateral water lines Continues use of water system that has existed on property since very early 20th Century, drawing creek water for crops, stock watering, and domestic uses.
C.	Do you already have any water rights or claims associated with this property or system?  PROVIDE DOCUMENTATION.  Riparian rights adn prior apporpriation.  No (er) or Add. Cert.  Provided the prior apporpriation of the property of system?  Provided the prior apporpriation of the property of system?  Provided the prior apporpriation of the property of system?  Provided the prior apporpriation of the property of system?
	tion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION mpleted for all domestic/public supply uses.)
A.	Number of "connections" requested: 6 Type of connection Home, Barn, Outside faucets
B.	Are you within the area of an approved water system?   If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.   (Homes, Apartment, Recreational, etc.)  □ YES □ NO  County Health Department.
Com	plete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health?  If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan?  If yes, when was it approved? Please attach the current approved version of your plan. □ YES ▼□ NO
	tion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION mplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 150
B.	List total number of acres for other specified agricultural uses:
	Use Hay - Alfalfa         Acres 75           Use Wheat         Acres 75           Use         Acres
C.	Total number of acres to be covered by this application: 150
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)  Add up the acreage in which you have a controlling interest, including only:  ‡ Acreage irrigated under water rights acquired after December 8, 1977;  ‡ Acreage proposed to be irrigated under this application;  ‡ Acreage proposed to be irrigated under other pending application(s).
	<ol> <li>Is the combined acreage greater than 2000 acres?</li> <li>Do you have a controlling interest in a Family Farm Development Permit?</li> <li>If yes, enter permit no:</li></ol>
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking

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## Section 8. WATER STORAGE

Will y	ou be using a dam, dike, or other structure to retain or store water?	☐ YES 🇷 NO
some p	If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or nortion of the storage will be above grade, you must also apply for a reservoir permit. You can gution from the Department of Ecology.	
Sec	tion 9. DRIVING DIRECTIONS	
Provid	e detailed driving instructions to the project site.  South of Spokane on Palouse Highway Right onto Valley Chapel Road, left onto Latah Creek Road to site.	
Sect	tion 10. REQUIRED MAP	
A.	Attach a map of the project. (See instructions.)	
Sec	tion 11. PROPERTY OWNERSHIP	
A.	Does the applicant own the land on which the water will be used?  If no, explain the applicant's interest in the place of use and provide the name(s) and a	X□ YES □ NO address(es) of the owner(s):
В.	Does the applicant own the land on which the water source is located?  If no, submit a copy of agreement:	☑ YES □ NC
to pro monit	fy that the information above is true and accurate to the best of my knowledge. I cess my application, I grant staff from the Department of Ecology access to the sit oring purposes. Even though I may have been assisted in the preparation of the alyees of the Department of Ecology, all responsibility for the accuracy of the information of the accuracy of the information.	te for inspection and bove application by the
Applie	cant (or authorized representative)  8-6-0/ Date	
	조막 모든 경기에 되어 남자 어떻게 되었다. 이 이번 모이지 않다.	

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Date

Landowner for place of use (if same as applicant, write "same")

We are returning your application for the following	reason(s):			
Examination fee was not enclosed	ACCOUNTY OF THE PROPERTY OF TH	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128		
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE		
Explanation:				
Please provide the additional information requested	l above and return your applate).	plication by		
Ecology staff_	Date			

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice)

APPLICATION

Ecology is an Equal Opportunity and Affirmative Action employer.

or (360) 407-6006 (TDD).

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